



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 9105

|                             |                                       |              |                        |                                    |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------|
| SERIAL NUMBER<br>09/888,478 | FILING DATE<br>06/26/2001<br><br>RULE | CLASS<br>184 | GROUP ART UNIT<br>3682 | ATTORNEY<br>DOCKET NO.<br>8200.461 |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------|

APPLICANTS

Thomas Nahrwold, Ossian, IN;

\*\* CONTINUING DATA \*\*\*\*\*  
*None cn 8/26/05*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*none cn 8/26/05*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 08/15/2001

|   |   |                           |                        |                       |                            |
|---|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR<br>COUNTRY<br>IN | SHEETS<br>DRAWING<br>3 | TOTAL<br>CLAIMS<br>20 | INDEPENDENT<br>CLAIMS<br>2 |
|---|---|---------------------------|------------------------|-----------------------|----------------------------|

Verified and Acknowledged  
 Examiner's Signature *Ch* Initials

ADDRESS

Liniak, Berenato, Longacre & White  
 Suite 240  
 6550 Rock Spring Drive  
 Bethesda, MD  
 20817

TITLE

Lubricant cooling system for a motor vehicle axle

|                                   |  |  |
|-----------------------------------|--|--|
| FILING FEE<br><br>RECEIVED<br>710 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT.<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____ |
|-----------------------------------|--|--|